ACCESS Online Education Registration Form (Campus 5)



Please return this form and a \$40 application fee* to:

ACCESS | P. O. Box 806 | Mississippi State, MS 39762

*Make check or money order payable to Mississippi State University.

PLEASE PRINT APPLICATION INFORMATION

ocial Security No.*		Email			
lease view the university disclaimer regardin	ng Social Security numbers: admission	s.msstate.edu./ssn-disclaimer			
lame			Preferred Name		
Last	First	Middle	_		
Permanent Home Address					
	Street	City	State	ZIP	
Current Mailing Address					
	Street	City	State	ZIP	
lome Telephone ()		If under 21, another number where your pare	rent(s) may be reached (
Cell Phone()	Ma	ay we text you at this number? yes () no ()		
Country of Citizenship		Are you a resident ali	en (permanent resident o	of the U.S.)? ye	es () no ()
_		(If yes, submit a copy of green card.)			
are you legally a resident o	f Mississippi? yes () no () If yes, for how long?			
County of Residence		If not, of what state or country	are you a legal resident?		
	Y)	Place of Bir			
thnicity/Race [*] Hispanic/La	· .	If no: ()American Indian or A	Alaska Native	() Asian
	no ()	() Black or African Ame		() White
		() Native Hawaiian or (Other Pacific Islander	r () Other
Gender		ious Preference (optional)			
his information is used for statistical purpos owever, an answer would be appreciated.	es and to provide information require	ed by the U. S. Department of Education in accordance wit	tn applicable federal regulations. Y	ou are not required	to answer these que
ather's Name					
	Last	First			M. I.
lis Address					
	Street	City	State	ZIP	
oid he attend MSU?	Deceased?	Father's email, if applicable	e		
Nother's Name					
	Last	First			M. I.
ler Address					
	Street	City	State	ZIP	
oid she attend MSU?	Deceased?	Mother's email, if applicable			
re you the child of a current MSL	J employee? yes () no ()			
re you the child of an active or re	etired Mississippi State Exter	nsion Service employee? yes () no ()		
re you the child or grandchild of	a former MSU athlete?	yes () no ()			
re you a dependent or survivor o	of a veteran of the US Armed	Forces (includes active and reserve compo	onents)? yes () no ()	

ACADEMIC INFORMATION			
Current or Former High School	Completion Date		
Location			
CERTIFICATION			
lation of any subsequent enrollment. I further understand that sand/or imprisonment. I also understand that by signing this doc	ission and/or scholarship to Mississippi State University and cancel- submitting fictitious or fraudulent documents could result in fines ument, I agree to follow all the policies and procedures of MSU, University student, I will conduct myself with honor and integrity at		
Signature	Date		
-	ficial six-semester high school transcript (through the junior year) to for the senior year. Transfer applicants should have official tran-		
The following information that Mississippi State University is red dress below:	quired to provide by federal law may now be found at the Web ad-		
 University Policies Relating to Students and Student All MSU students are responsible for knowing Mississippi State University Annual Security Report 	and abiding by these policies.		
This report includes statistics for the previous in certain off-campus buildings, on property or immediately adjacent to and accessible from ting campus security, alcohol and drug use, crimatters.	three years concerning reported crimes that occurred on campus, wned and controlled by MSU, and on public property within, or the campus. This report also includes institutional policies concernme prevention, the reporting of crimes, sexual assault, and other		
	web/security.html opy of any of the above information, please contact		
	s, at 662.325.3611 or tb2@msstate.edu.		
I understand that, if accepted, this application only allows me	to enroll in DSS courses offered through MSU Online Education		

Date

(Campus 5).

Signature